CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

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PRACTOVER PAGESION

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Please type or print in ink.	PR-4 AMII: 23
NAME OF FILER (LAST)	(FIRST) Deputy Car Cook, (MIDDLE)
DENME YSTES	<u> </u>
1. Office, Agency, or Court	
Agency Name CT4 of CHino/Rodevelapmod A Division, Board, Department, District, if applicable	A Pove (4) Your Position
► If filing for multiple positions, list below or on an attachment.	
Agency: SEE ATTACH MONT	Position: MAYOR
2. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge (Statewide Jurisdiction)
Multi-County	County of
City of CHINO	NOTHERSON BORNONDINO, COUNTY
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2010, through December 2010.	31, Leaving Office: Date Left/(Check one)
The period covered is, through December 3 2010.	O The period covered is January 1, 2010, through the date of leaving office.
Assuming Office: Date/	The period covered is
Candidate: Election Year Office sought, if of	different than Part 1:
4. Schedule Summary	
Check applicable schedules or "None."	► Total number of pages including this cover page:3
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Giffs - schedule attached
Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- None - No reportable inte	erests on any schedule
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I certify under penalty of perjury under the laws of the State of Califo	rnia that
Date Signed 3-18-201/ (month, day, year)	Signatur

SCHEDULE C Income, Loans, & Business **Positions** (Other than Gifts and Travel Payments)

CALIFORNIA F	FORM 700 CTICES COMMISSION
Name	·
Dennis R.	Yates

► 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
AEGIS MEDICAL SYSTEM	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
AEGIS MEDICAL SYSTEM ADDRESS (Business Address Acceptable) 125 FST, ONTONIO, CA. 9,764	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Drug Rehab	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION .
NURSC	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of	Sale of(Property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
	<u> </u>
-	
Other(Describe)	Other(Describe)
(Describe)	\Describej
► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	ion.
of a retail installment or credit card transaction, made	l lending institutions, or any indebtedness created as part
	your official status. Personal loans and loans received
not in a lender's regular course of business must be	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
MAINT OF FEMBER	INTEREST IVALE TERM (MODILING TERMS)
ADDRESS (Business Address Acceptable)	% None
1.551.250 (2.661.660 / idaioso / ida	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
poortion for the first of garagest	
	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD	
<u></u> \$500 - \$1,000	City
S1,001 - \$10,000	Guarantor
\$10,001 - \$100,000 	
OVER \$100,000	Other
	(Describe)
Comments:	

Mayor Dennis Yates is a Board Member or Alternate of the following entities:	
SanBag, San Bernardino County, Ca	

Omnitrans, San Bernardino County, Ca

South Coast Air Quality Management District, San Bernardino, Orange, Riverside and Los Angeles counties.